NHLBI DNA Sequencing and Computational Biology Core

Project Registration Form

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Please provide the following information and return to the DSCBC, c/o Jun Zhu, Ph.D., Bldg 10, 7N324, jun.zhu@nih.gov

1. Project Title: _____

2. Brief Description of Project (scientific question(s) to be addressed)

3. Project type:

    Genome: Whole Genome   Exome   Targeted Resequencing

    Transcriptome: Small RNA   DGE   RNA-Seq

    Others: ChIP-Seq   CLIP-Seq   Other: _____(please specify)

    Species: _____   **Cell Type:** _____   **# of samples:** _____

    Single End: _____ cycles

    Paired End: _____ cycles + _____ cycles

4. Additional Information (please check all that apply):

Consultation (experimental design)   Consultation (library construction)

Target Enrichment   Samples with Limited Quantity

5. Data Analysis:

Mapping and alignment (Basic)   In-depth analysis (Advanced)

6. Data Storage Plan

Portable Device   Network Storage

7. Data Sharing Plan:

8. IRB Approval If Required:

9. Project Approval

Scientist doing the project _____Lab Branch_____

Phone Number _____Fax number _____

Supervisor (Principal Investigator)_____

Signature of principal investigator _____

Date _____